



Attorney's Docket No. 02751-675

RCE/K600
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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of)
Jean-Marc BALLOUL *et al.*) Group Art Unit: 1648
Application No.: 09/043,933) Examiner: Shanon A. Foley
Filed: March 30, 1998) Confirmation No.: 7553
For: PHARMACEUTICAL COMPOSITION)
FOR TREATING PAPILLOMA VIRUS)
TUMORS AND INFECTION)

**REQUEST FOR CONTINUED EXAMINATION
TRANSMITTAL LETTER**

MAIL STOP RCE

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Customer No. 21839

Sir:

Applicant(s) requests continued examination under 37 C.F.R. § 1.114 and enclose the
[] \$375.00 (2801) [X] \$750.00 (1801) fee due under 37 C.F.R. § 1.17(e).

1. [] A. Applicant(s) requests that any previously unentered after final amendments not be entered. Continued examination is requested based on the enclosed documents identified in item 2 below.

[] B. Applicant(s) previously submitted the following documents for which continued examination is requested:
[] Consider the amendment(s)/reply under 37 C.F.R. § 1.116 previously filed on _____.
[] Consider the arguments in the Appeal Brief or Reply Brief previously filed on _____.
[] Other: _____.
2. The following documents are enclosed with this submission:
[X] Amendment/Reply.
[] Affidavit(s)/Declaration(s).
[X] Information Disclosure Statement (IDS).
[X] Petition for Extension of Time.
[] Other: _____.
3. [] Small entity status is hereby claimed.
[] No additional claim fee is required.
[X] The fee is calculated below on the basis of the highest number of claims already paid for in this application prior to this submission:

07/29/2003 JBALINAN 00000012 09043933

01 FC:1801
02 FC:1201
03 FC:1202

750.00 OP
252.00 OP
18.00 OP

(05/03)

Request for Continued Examination Transmittal Letter

Application No. 09/043,933

Attorney's Docket No. 032751-015

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C L A I M S					
	No. Of CLAIMS	HIGHEST NO. OF CLAIMS THUS PAID FOR	EXTRA CLAIMS	RATE	FEE
Basic Fee					\$750.00 (1001)
Total Claims	57	MINUS 56 =	1	× \$18.00 (1202) =	18.00
Independent Claims	7	MINUS 4 =	3	× \$84.00 (1201) =	252.00
If multiple dependent claims are presented, add \$280.00 (1203)					0.00
Total Fee					1,020.00
If small entity status is claimed, subtract 50% of Total Fee					
TOTAL FEE DUE					1,020.00

4. A check in the amount of \$ 1,020.00 is enclosed for the fee due.
5. Charge \$ _____ to Deposit Account No. 02-4800 for the fee due.
6. Applicant(s) requests suspension of action by the Office until at least ___, which does not exceed three months from the filing of this RCE, in accordance with 37 C.F.R. § 1.103(c). The required fee under 37 C.F.R. § 1.17(i) is enclosed.

The Director is hereby authorized to charge any appropriate fees under 37 C.F.R. §§ 1.16, 1.17 and 1.21 that may be required by this paper, and to credit any overpayment, to Deposit Account No. 02-4800. This paper is submitted in duplicate.

Respectfully submitted,

BURNS, DOANE, SWECKER & MATHIS, L.L.P.

Date: July 28, 2003

By: 
 Deborah H. Yellin
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